

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

**In re:**

**W.R. GRACE & CO., et al.,**

**Debtors.**

**Chapter 11**

**Case No. 01-1139 (JKF)  
Jointly Administered**

Objection Date: December 2, 2011 at 4:00 p.m.

Hearing: December 19, 2011 at 9:00 a.m.

**COVER SHEET TO SIXTY-FIFTH MONTHLY INTERIM APPLICATION OF  
DAVID T. AUSTERN, ASBESTOS PI FUTURE CLAIMANTS' REPRESENTATIVE  
FOR COMPENSATION AND REIMBURSEMENT OF EXPENSES FOR THE PERIOD  
MARCH 1, 2011 THROUGH MARCH 31, 2011**

Name of Applicant:	David T. Austern, Asbestos PI Future Claimants' Representative ("FCR")
Authorized to Provide Professional Services to:	As the FCR
Date of Retention:	May 25, 2004
Period for which compensation is sought:	March 1, 2011 through March 31, 2011
Amount of Compensation (100%) sought as actual, reasonable, and necessary:	\$2,650.00
80% of fees to be paid:	\$2,120.00 <sup>1</sup>
Amount of Expense Reimbursement sought as actual, reasonable and necessary:	\$ 824.40
Total Fees @ 80% and 100% Expenses:	\$2,944.00

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<sup>1</sup> Pursuant to the Administrative Order, as Amended dated April 17, 2002, absent timely objections, the Debtors are authorized and directed to pay 80% of fees and 100% expenses.

This is an:     \_\_\_   interim     X   monthly     \_\_\_   final application.

The total time expended for fee application preparation during this time period is 0.00 hours and the corresponding fees are \$0.00 and expenses are \$0.00. Such time spent on such tasks will be requested in subsequent monthly interim applications or have been performed by the FCR's bankruptcy counsel, Orrick, Herrington & Sutcliffe LLP.

### **COMPENSATION SUMMARY**

**MARCH 2011**

<b><u>Name of Professional Person</u></b>	<b><u>Position of Applicant</u></b>	<b><u>Hourly Billing Rate</u></b>	<b><u>Total Billed Hours</u></b>	<b><u>Total Compensation</u></b>
David T. Austern	Future Claimants' Representative	\$500.00	5.30	\$2,650.00
<b>Grand Total:</b>			<b>5.30</b>	<b>\$2,650.00</b>
<b>Blended Rate: \$500.00</b>				

**Total Fees:           \$2,650.00**

**Total Hours:           5.30**

**Blended Rate:         \$ 500.00**

### **COMPENSATION BY PROJECT CATEGORY**

<b><u>Project Category</u></b>	<b><u>Total Hours</u></b>	<b><u>Total Fees</u></b>
Plan & Disclosure Statement	5.30	\$2,650.00
<b>TOTAL</b>	<b>5.30</b>	<b>\$2,650.00</b>

### **EXPENSE SUMMARY**

<b><u>Expense Category</u></b>	<b><u>Total</u></b>
Airfare	\$735.40
Parking	\$20.00
Taxi	\$69.00
<b>TOTAL</b>	<b>\$824.40</b>

Respectfully submitted,

Dated: August 9, 2011

/S/ DAVID T. AUSTERN

David T. Austern

Claims Resolution Management Corporation

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